2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762791

FILED Apr 26, 2007 Secretary of State

Entity Name: MISTY PINES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

BAYVIEW PROPERTY MGMT C/O ABILITY MANAGEMENT, INC

4600 ENTERPRISE AVE. STE A 6312 TRAIL BLVD NAPLES, FL 34104 NAPLES, FL 34108

Current Mailing Address: New Mailing Address:

BAYVIEW PROPERTY MGMT C/O ABILITY MANAGEMENT, INC

4600 ENTERPRISE AVE. STE A PO BOX 770278 NAPLES, FL 34104 NAPLES, FL 34107

FEI Number: 59-2370990 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WRIGHT, RUSSELL
4600 ENTERPRISE AVE
STE A
NAPLES, FL 34104 US
LIVELY, DENNIS F
6312 TRAIL BLVD
NAPLES, FL 34108 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DENNIS F LIVELY 04/26/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHAN

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD () Delete Title: PD (X) Change () Addition

Name: DEACON, ROBERT Name: JENSEN, RICHARD
Address: 800 MISTY PINES CIRCLE # H206 Address: 600 MISTY PINES CIR. #FL04

City-St-Zip: NAPLES, FL 34104 City-St-Zip: NAPLES, FL 34105

Title: VPD () Delete Title: VPD (X) Change () Addition

Name: EDWARDS, JEAN Name: DUPLAA, CELESTE

Address: 700 MISTY PINES CIRCLE # 6 101 Address: 600 MISTY PINES CIRCLE #F201

City-St-Zip: NAPLES, FL 34105 City-St-Zip: NAPLES, FL 34105

Title: PD () Delete Title: STD (X) Change () Addition Name: JENSEN, RICHARD Name: TIMMINS, WILLIAM

Address: 600 MISTY PINES CIR. FL04 Address: 700 MISTY PINES CIRCLE #G-105

City-St-Zip: NAPLES, FL 34105 City-St-Zip: NAPLES, FL 34105

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD JENSEN PD 04/26/2007